| STATE OF INDIANA |)) SS: | BEFORE THE | INDIANA |
|---|---------------|---------------------------|--|
| COUNTY OF MARION |) | COMMISSIONER OF INSURANCE | |
| | | CAUSE NUME | BER: 5470-AG07-0613-149 |
| Donald Sills, Producer / Respondent | | .) | |
| 2915 West 78 th Place P.O. Box 11357 Merrillville, Indiana 46411 | |))) | AUG 1 7 2007 |
| Type of Agency Action: I | Enforcement |) .) | STATE OF INDIANA DEPT. OF INSURANCE |
| Indiana Incurance Licen | aa Na . 47724 | ` · | |

FINAL ORDER AND APPROVAL

The Indiana Department of Insurance ("Department") and Donald Sills, ("Respondent"), a licensed Indiana Insurance producer, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent's license, and which has been submitted to the Commissioner of Insurance (the "Commissioner") for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Commissioner of Insurance:

1) Respondent's insurance license number 477227 shall be immediately and permanently revoked as permanently revoked is defined under I.C. 27-1-15.6-12 (a) (1) & (2).

ALL OF WHICH IS ORDERED this ______ day of August, 2007.

James Atterholt, Commissioner Indjana Department of Insurance

Distribution:

Michael Trimble, Investigator INDIANA DEPARTMENT OF INSURANCE 311 West Washington Street, Suite 300 Indianapolis, Indiana 46204-2787

Donald Sills 2915 West 78th Place P.O. Box 11357 Merrillville, Indiana 46411

| STATE OF INDIANA) | BEFORE THE INDIANA |
|--|---|
|) SS: COUNTY OF MARION) | COMMISSIONER OF INSURANCE |
| | CAUSE NUMBER: 5470-AG07-0613-149 |
| Donald Sills, Producer / Respondent | |
| 2915 West 78 th Place P.O. Box 1 Merrillville, Indiana 46411 | AUG 1 7 2007 |
| Type of Agency Action: Enforcement | nent) STATE OF INDIANA DEPT. OF INSURANCE |

Indiana Insurance License No.: 477227

AGREED ENTRY

This Agreed Entry is entered into by Nikolas P. Mann, attorney for and on behalf of the State of Indiana, Department of Insurance ("Department"), and Donald Sills ("Respondent"), a licensed Indiana insurance agent holding license number 477227, to resolve all matters under the above Cause Number. This Agreed Entry is subject to the review and approval of James Atterholt, Commissioner, Indiana Department of Insurance.

WHEREAS, Respondent is a licensed insurance agent in the State of Indiana; and

WHEREAS, the Department and Respondent desire to resolve their differences and settle the issues without a hearing;

IT IS THEREFORE, NOW AGREED by and between the parties as follows:

 The Commissioner has jurisdiction over the subject matter and the Respondent in this administrative action.

- 2. This Agreed Entry is executed voluntarily by the parties.
- Respondent voluntarily and freely waives his right to a public hearing on the issues in this action.
- Respondent voluntarily and freely waives his right to petition for judicial review on this matter.
- 5. The Respondent agrees to a Permanent Revocation of his Indiana insurance license number 477227 as Permanent Revocation is defined under Indiana Code Title 27-1-15.6-12 (a) (1) and (2)
- The Department agrees to accept Respondent's compliance with the terms of this Agreed Entry as full resolution of this matter.
- Respondent has carefully read this agreement and fully understands and accepts its terms.

8/2/07 Date Signed

Nikolas P. Mann, Attorney Indiana Department of Insurance

Date Signed

Donald Sills, Respondent

INDIANA DEPARTMENT OF INSURANCE Enforcement Division Suite 300 311 West Washington Street Indianapolis, IN 46204-2787 317/233-4243 - telephone 317/232-5251 - facsimile



| BEFORE THE INDIANA | |
|-------------------------------------|--|
| COMMISSIONER OF INSURANCE | |
| CAUSE NUMBER: 5470-AG07-0613-149 | |
| . } | |
|)) Stick E fr Stati face. | |
| | |
|) JUN 2 6 2007 | |
| STATE OF INDIANA DEPT. OF INSURANCE | |
| | |

STATEMENT OF CHARGES

License Number: 477227

The Enforcement Division of the Indiana Department of Insurance (the "Department"), pursuant to the Indiana Administrative Orders and Procedures Act, Indiana Code Section 4-21.5-1, and the Agent Licensing provisions, Indiana Code Section 27-1-15.6, files charges against Donald Sills ("Respondent"), an insurance agent holding an expired insurance license in the State of Indiana:

COUNT I

- Respondent holds insurance license number 477227, which was issued by the Department and is currently inactive due to failure to pay child support.
- 2. Respondent on January 4, 2006 wrote an application for life insurance on an Edwin Baker located in Gary, Indiana. His wife, Willa Mae Baker was present at that time.

3. Respondent according to the complainant Mrs. Baker never asked any health questions, but later checked them all "NO", which was false, because Mr. Baker did have

health considerations.

4. Respondent was replacing a life insurance policy with American Income

Life Insurance Company that been effect for a little over two years, but never conducted

the sale as a replacement. The American Income Life policy was past the contestability

period and the new Americo policy did not provide significantly increased benefits.

5. Mr. Baker later passed away and was denied payment of the death

benefit, because of the pre-existing conditions that he had.

6. Respondent's conduct as alleged herein, is contrary to 27-1-15.6-12 (b)

(5), 27-1-15.6-12 (b) (8) and 760 IAC 1-16.1-5 (A) and (B) (in accordance with 760 IAC

1-16.1-9) and cause for disciplinary action to include sanctions, fine, and revocation of

license.

Wherefore, the Department, by its counsel, Nikolas Mann, prays the Commissioner

permanently revoke the life license number 477227 of Donald Sills, fine him in the amount

of ten thousand dollars (\$10,000.00), and all other appropriate relief.

Nikolas Mann

Attorney # 26665-29

INDIANA DEPARTMENT OF INSURANCE

Suite 300

311 West Washington Street Indianapolis, IN 46204-2787

317/232-2385 - telephone

317/232-5251 - facsimile

CERTIFICATE OF SERVICE

This is to certify that a copy of the Statement of Charges has been served upon the Respondent in the captioned proceeding by depositing by First Class U.S. mail, postage prepaid, this 🖳 day of June 2007.

Nikolas Mann Attorney # 26665-29

INDIANA DEPARTMENT OF INSURANCE Enforcement Division Suite 300 311 West Washington Street Indianapolis, IN 46204-2787 317/232-2385 - telephone 317/232-5251 - facsimile